V. NUTRITION SERVICES AND ADMINISTRATION (NSA) EXPENDITURES

(Please indicate) State Agency: Wisconsin for FY 2022

NSA expenditures involve the process of allocating, documenting and monitoring the distribution of administrative funds to local agencies, including the monitoring of nutrition education costs, and State and local agency direct/indirect costs.

- A. <u>Funds Allocation</u>-246.4(a)(13): describe the policies and procedures used to allocate administrative funds to local agencies, including start-up funds, and conversion of food funds to NSA funds.
- **B.** <u>Local Agency Budgets/Expenditure Plans</u>-246.4(a)(2): describe the policies and procedures for preparing and submitting local agency budgets and expenditure plans and the services that are entirely supported by WIC Program funds.
- C. <u>State and Local Agency Access to Funds-</u>246.4(a)(13): describe the procedures and method(s) of distribution/ reimbursement of NSA funds to local agencies.
- D. <u>Reporting and Reviewing of State and Local Agency Expenditures</u>-246.4(a)(11)(iv); (12); and (13): describe the policies and procedures used to report, monitor, and review State and local agencies' expenditures, including the documentation of staff time, local agency report forms, on-site reviews of local agencies' NSA expenditures, and in-kind contributions.
- E. <u>Nutrition Education Costs</u>-246.4(a)(9)and 246.14(c)(1): describe the plans and procedures used to meet the nutrition education expenditure requirements, including monitoring activities, local agency reports, and assurances that the special nutrition education needs of migrant farmworkers and their families, Indians, and homeless persons are met.
- F. <u>Indirect Costs</u>-246.4(a)(12): describe the policies and procedures used to document and monitor indirect cost rates and services at the State and local level.

A. Funds Allocation

1.	Allocation Process					
a. The State agency has established and provided written procedures to local agencies the process for allocation of NSA funds among local agencies.						
	⊠ Yes	□ No		ble, State agency does not have separate local Proceed to A. 2. <i>Conversion of Food Funds to</i>		
b.	Local agencies we	ere involved in	developing these	procedures via:		
	 ☐ Task force/committee of selected local agencies ☐ Comment on proposals made available to all local agencies ☑ Other (describe): State office task force convened to determine 					
c.	The State agency	allocates NSA	funds to local age	ncies through the use of:		
	☐ A negotiated bud ☐ Formula (variable	•	Flat cost per particip Other method (desc			
d.	The allocation pro	cedure takes tl	he following facto	rs into account (check all that apply):		
	 □ Staffing needs ⋈ Number of participants □ Population density □ Cost-containment initiatives □ Availability of administrative support from other sources ⋈ Other (specify): geographic area if serving multiple counties, satellite clinics, interpreter costs 					
e. The State agency methodology for funds allocations to local agencies includes a mechanism reallocation.			ns to local agencies includes a mechanism for			
	☑ Yes☐ Monthly☐ No	☐ Quarterly	⊠ Semiannually	☑ Other (specify): as needed if significant changes		
	ADDITIONAL DET	AIL: NSA Expe	nditures Appendix	and/or Procedure Manual (citation):		
2.	Conversion of Food Funds to NSA Funds					
a.	The State agency	converts food	funds to NSA fund	ls:		
	☐ Based on a plan submitted to FNS to reduce average food costs per participant and to increase participation above the FNS-projected level for the State agency.					
		☑ The State agency achieves, through acceptable measures, increases in participation in excess of the FNS-project level for the State agency.				
	☐ Describe measu	measures used to increase participation:				
	ADDITIONAL DET	AIL: NSA Expe	enditures Appendi	x and/or Procedure Manual (citation):		

3. The State's Fiscal Year runs from 07/01/2021 to 06/30/2022

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ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

B. Local Agency Budgets/Expenditures Plans

1.	Local Agency Budgets/Expenditure Plans					
	☐ Not applicable, State agency does not have separate local agencies. (Proceed to C. State and Local Agency Access to Funds.)					
a. The State agency requires its local agencies to prepare and submit administrative budgets						
	⊠ Yes	□ No				
		If yes, the State agency requires that local agency budgets include the same cost categories as those used for State-level budget preparation.				
	☐ Yes	⊠ No				
b.	Local agencies	s' budgets are broken o	out by (check all that apply):			
	☑ Lease or☑ Functions☑ General a	vices eding aids eding aids expenditures services ications e salaries e fringe benefits rental of space administration/ management livery tion	 ☑ Maintenance and repair ☑ Materials and supplies ☑ Memberships, subscriptions, and professional activities ☑ Printing and reproduction ☑ Training and education ☐ Transportation ☑ Travel ☑ Other (specify): indirect costs, consultants/contractual, special projects ☑ Breastfeeding promotion/support (e.g., breastfeeding aids ☑ Client services ☐ Other (specify): 			
C.		ncy has an established or modifications to their	formal process for local agencies to follow when requesting r budgets.			
		□ No				
d.			ired WIC administrative budget, the State agency:			
	□ Reports unde⋈ Extracts or continue the federal line□ Other (description)	 ☐ Uses local agency budgets or prior year expenditures ☐ Reports under an ongoing system to collect this data ☑ Extracts or consolidates data reported under other State or local agency systems to group costs under the federal line items and functions ☐ Other (describe): (State WIC administrative budgets are not submitted to FNS, but are used by State agencies as a 				
	management tool and may be reviewed by FNS.)					

ADDITIONAL DETAIL: SA/LA Spending Plan Appendix and/or Procedure Manual (citation): Appendix V.B.1 Budget Forms, Policy 11.2

C. State and Local Agency Access to Funds 1. The State Agency manages its NSA Grant on a/an: ☐ Cash basis ⋈ Accrual basis ☐ Other (specify): ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation): 2. Reimbursement/Provision of Funds to Local Agencies a. The State agency provides local agencies with funds in advance. ☐ Yes (state conditions): ⊠ No ☐ Not Applicable (Proceed to next section.) If yes, advances must be reconciled to incoming claims. Local agency claims are submitted: ☐ Monthly □ Quarterly b. In order to qualify for payment, an expenditure must be (check all that apply): ☐ At or below the level of its approved budget line item Supported by appropriate documentation (e.g., check or receipt) ⋈ A reasonable and necessary expense for WIC ☐ Other (specify): c. If an expenditure exceeds the budget provided for that particular line item, the State agency requires the local agency to (check all that apply): ☐ Submit a supplemental request ☐ Provide a justification for exceeding the budget line item ☐ Request approval of a budget modification ☐ Other (explain): d. Local agencies receive payment via:

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

☐ State treasury check/warrant

⋈ Electronic funds transfer

☐ Other (specify):

D. Reporting and Reviewing of State and Local Agency Expenditures

1.	Docum	nentation	of Staff Time	•	
a.	How does the State agency determine the percentage of staff time devoted to WIC tasks to document allowable staff costs under the WIC Program (check all that apply):				
	At SA	At LA			
			100 percer Random m Periodic tin	oment sampling	
				veek/month	
			1 r	nonth/quarter cify): 1 month/year	
b.				ated its time documentation protocol on (specify date). 10/01/2004. copy of the protocol to this section or cite Procedure Manual reference	
			AIL: NSA Expe Time Study	enditures Appendix and/or Procedure Manual (citation):	
2.	Please	indicate	below the se	ervices that are entirely supported by WIC funds:	
	 ☑ Anthropometric measurements ☑ Nutrition counseling/education ☑ Breastfeeding promotion/support ☑ Immunization status assessments ☑ Referrals to health and/or social services ☑ Hematological assessments ☑ Other (specify): certification, food benefit issuance, vendor management, daily program management 				
ΑD	DITION	AL DETA	AIL: SA/LA Sp	ending Plan Appendix and/or Procedure Manual (citation):	
3.	Local	Agency I	Report Forms		
a.		_	• •	standard forms and/or procedures for local agencies to use in el expenditures.	
	⊠ Yes	[□ No □ N	lot Applicable (Proceed to next section)	
b.	Local	agencies	s' budgets are	broken out by (check all that apply):	
		applicat e items	ole		
	□A	ccountin	g	⊠ Maintenance and repair	
	□A	DP servi	ces	⊠ Materials and supplies	
	⊠B	reastfee	ding aids	oxtimes Memberships, subscriptions, and professional activities	
	⊠C	apital ex	penditures	☑ Printing and reproduction	
	⊠C	linic/lab	services	⊠ Training and education	
	□ Communications □ Transportation				

		⊠ Travel				
	⊠ Employee fringe benefits	$\ \ \boxtimes$ Other (specify): indirect costs, consultants/contractual, special projects				
	□ Lease or rental of space					
	☑ General administration/	oxtimes Breastfeeding promotion/support (e.g., breastfeeding aids)				
	Program management					
	☐ Food Delivery	☐ Other (specify):				
	☐ Certification					
	⋈ Nutrition education					
	☐ Other (specify):					
ΑC	DITIONAL DETAIL: NSA Expend	litures Appendix and/or Procedure Manual (citation):				
P	Appendix V.D.3. CARS Report Fo	erm				
4.	On-Site Review of Local Agence	ies' Administrative Expenditures				
a.	The State agency conducts on-	The State agency conducts on-site reviews of local agency administrative expenditures:				
	☐ Annually ⊠ Every two	years Every three years				
	☐ Other (specify):					
	The review is conducted by:					
	⋈ WIC State agency staff					
	\square State Department of Health fi	scal or audit staff				
	☐ CPA or audit firm					
	☐ Other (specify):					
b.	The State agency utilizes a star	ndard format/guide to review local agencies' NSA expenditures.				
	⊠ Yes □ No					
	If yes, the standard review guid	e includes the following procedures (check all that apply):				
	∀ Verification of at least one mo	nthly billing/claim/expenditure report against source				
	☐ Documents					
	· •	g, receipt, billing, and payment				
		necessary, reasonable and appropriate				
		properly allocated among WIC and other programs				
	·	costs charged to WIC were appropriate				
	☑ Determination that local agend☐ Other (specify):	cies' indirect costs were appropriately charged				
c.	If available inlease attach a cor	by of the State agency's NSA expenditure review guide.				
•	a. a	,				

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d.	The State agency notifies local agencies of findings and establishes claims for unallowable costs, as appropriate.					
	⊠ Yes	□ No				
Sec exp and Un Wis	ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation): See Appendix X.A.2.d. Wisconsin WIC Fiscal Monitoring Tool. Regarding audits: For those WIC agencies that expend \$750,000 or more in federal awards for the audit year, the WIC provider agency is required to have an annual compliance and financial audit performed in accordance with Uniform Guidance (2 CFR Part 200), the Uniform Guidance's Compliance Supplement, the Wisconsin's State Single Audit Guidelines (SSAG), and the Wisconsin DHS Audit Guidance appendix to the SSAG. Link: https://www.dhs.wisconsin.gov/business/audit-federal.htm					
5.	The State agency requires local agencies to document the sources and values of in-kind contributions.					
	□ Yes	⊠ No				
ΑD	ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):					

E.	Nutrition Education Costs				
1.	The State agency documents that it meets its nutrition education and breastfeeding promotion expenditure requirements per 7 CFR 246.14(c)(1) via:				
	\square Activity reports \boxtimes Time studies \square	Itemizing	expenditures		
	☐ Other (specify):				
	DITIONAL DETAIL: NSA Expenditures Appenditures Appenditures V.D.1. Time Studies; Policy 11.2	lix and/or	Procedure Manual (citati	on):	
2.	The State agency monitors expenditures for a promotion and support at the State and/or lo		_	reastfeeding	
		At SA	At LA		
	Breastfeeding promotion coordinator's salary	\boxtimes			
	Written educational materials	\boxtimes	\boxtimes		
	Participant education/counseling		\boxtimes		
	Staff training		\boxtimes		
	Breastfeeding promotion activities		\boxtimes		
	Direct support costs		\boxtimes		
	Breastfeeding aids and equipment (e.g., breast pumps purchased with NSA funds)				
	Other				
	(If other, specify):				
ΑD	DITIONAL DETAIL: NSA Expenditures Append	lix and/or	Procedure Manual (citati	on):	
Pol	icies 11.1, 11.2				
3. In the event that the State agency uses funds from other sources in meeting minimum expendit requirements for nutrition education (NE) and breastfeeding promotion and support (BFPS), please provide below the source of these funds, the amount, and the method the State agency use to document the use of these NE and BFPS funds. (Federal WIC food funds used to purchase/rent breast pumps, and expenditures from breastfeeding peer counseling funds, can be counted toward the nutrition education and breastfeeding expenditure requirement.) \[\times \text{Does not apply. (Proceed to E. 4. Local agencies report nutrition education and breastfeeding)} \]				oport (BFPS), ne State agency will s used to eling funds, cannot rement.)	
promotion and support costs.)					
Source Amount					
	Method(s):				
	☐ Activity reports ☐ Time studies ☐] Itemizing	expenditures		
	☐ Other (specify):				

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

4.	Local agencies report nutrition education and breastfeeding promotion and support costs:
	☐ Does not apply
	☐ Through a different system (specify):
ΑD	DITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

F.	Indirect Costs				
1.	Indirect Cost Rate and Services				
a.	Please list below indirect cost/cost allocation ag	reements in which the State agency is included:			
	Indirect Cost Negotiation between Wisconsin DHS a	nd U.S. DHHS dated 1/4/2019			
b.	The State agency's indirect cost rate(s) is 6.5 (%)	and is based on:			
		n □Both			
	☐ Other (specify):				
C.	Please cite the effective date of the State agency allocation plan for indirect costs: 1/4/2019	's current negotiated agreement and/or cost			
d.	The State agency receives the following types of	services under the indirect cost rate agreement(s):			
	⊠ Budgeting/accounting	☐ Personnel/payroll			
	⊠ ADP	☐ Space usage/maintenance			
	☐ Communication/phone/mail	☐ Central supply			
	☐ Legal services				
	☐ Printing/publication				
	☐ Equipment usage/maintenance				
e.	The State agency allows local agencies to report	indirect costs.			
AD	DITIONAL DETAIL: NSA Expenditures Appendix a	nd/or Procedure Manual (citation):			
Apı	pendix V.F.1. Indirect Cost Negotiation Agreement				
2.	Review of Indirect Cost Documentation				
a.	a. The State agency and local agencies ensure that services received and paid for through indirect costs benefit WIC and are not also charged directly to WIC by comparing direct charges by line item to a listing of services paid by funds collected through the application of the indirect cost rate:				
	oxtimes Done for State agency level indirect costs (freque	ncy): Annually during Single Audit			
	□ Done for local agency level indirect costs (frequer)	cy): Annually during Single Audit			
	☐ Not done at either level.				

b.	applicable to ensure that indirect cost services are not also charged directly to WIC (check all that apply):				
		At SA	At LA		
	Indirect cost agreements/plans	\boxtimes			
	The accounting mechanism used to ensure the propriety of indirect cost charges				
	A copy of the cost allocation plan	\boxtimes	\boxtimes		
	A list of all services paid from indirect costs	\boxtimes	\boxtimes		
	Other documentation related to the establishment and charging of indirect costs				
	Not applicable				
c.	c. When the State agency reviews the local agencies' indirect cost rate agreements, the review includes (check all that apply):				
☑ Required submission of indirect cost agreement by the local agency to the State agency				У	
	$\hfill\Box$ Assessment of how the rate or method is applied (o	correct time period	, percentage, and	base)	
☐ Verification that the State agency had previously approved the local agency to negotiate such an agreement				e such an	
	$\hfill\square$ Post-review or audit to ensure the rate was applied	correctly			
	$\hfill\Box$ Other documentation related to the establishment a	and charging of ind	irect costs (list):		
	☐ Not applicable				
۸٦٢	NTIONAL DETAIL: NSA Expanditures Appendix and	l/or Procedure Ma	nual (citation):		